

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Council of Insurance Agents & Brokers Political Action Committee

ADDRESS (number and street) ▼

701 Pennsylvania Avenue, NW

Suite 750

☐ Check if different than previously reported. (ACC)

Washington

DC

20004-2608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00039578

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ken A. Crerar

Signature of Treasurer

Ken A. Crerar

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
05 01 2015 To: M M / D D / Y Y Y Y Y Y
05 31 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		784975.58
(b) Cash on Hand at Beginning of Reporting Period.....	778278.55	
(c) Total Receipts (from Line 19)	107554.01	371436.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	885832.56	1156411.71
7. Total Disbursements (from Line 31)	35967.40	306546.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	849865.16	849865.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
05 01 2015

To:

M M / D D / Y Y Y Y Y
05 31 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

99878.14

330770.51

(ii) Unitemized

7675.87

35665.62

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

107554.01

366436.13

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

107554.01

371436.13

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

107554.01

371436.13

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ►

107554.01

371436.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1967.40	6239.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1967.40	6239.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34000.00	295748.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	4559.17
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35967.40	306546.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35967.40	306546.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	107554.01	371436.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	107554.01	371436.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1967.40	6239.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1967.40	6239.38

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

Amending disbursement in response to FEC letter dated 1/31/2016; Donnelly for Indiana from P2016 to P2018;
Updated Donnelly for Indiana's Office Sought to Senate/IN (no district); Updated the contribution for Charles Boustany
asCharles Boustany Jr MD for Congress Committee from Boustany for Senate

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. James J Arconti

Mailing Address 13 Fernbrook Dr

City

Brookfield

State

CT

Zip Code

06804-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rose & Kiernan, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2015
Transaction ID : 38185914

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Craig S Horner

Mailing Address 715 Hawkshead Road

City

Lutherville

State

MD

Zip Code

21093-7019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kelly & Associates Insurance Group Inc

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 13 / 2015
Transaction ID : 38185916

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Johnny R Pitts

Mailing Address 3970 Grandview Ave

City

Memphis

State

TN

Zip Code

38111-7610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lipscomb & Pitts Insurance, LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2015
Transaction ID : 38185919

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

5500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Steven S Azevedo

Mailing Address 815 Eagle Ridge Circle

City State Zip Code
 Folsom CA 95630-6241

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Interwest Insurance Services, Inc. (HQ)

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38185921

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Richard M McKinley

Mailing Address 1915 Elmhurst Dr

City State Zip Code
 Germantown TN 38138-2771

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Lipscomb & Pitts Insurance, LLC

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : 38185924

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Andy Barrengos

Mailing Address 50 California Street
 Floor 12

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Woodruff-Sawyer & Company (HQ)

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : 38185926

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. W.H. Cooper

Mailing Address 200 Nash Circle

City State Zip Code
 Mountain Brk AL 35213-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AmWINS Brokerage of Alabama

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3015.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38185927

Amount of Each Receipt this Period

3015.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Matthew D DeFendis

Mailing Address 6873 N. West Ave.

City State Zip Code
 Fresno CA 93711-4308

FEC ID number of contributing
federal political committee.

C

Name of Employer
 DiBuduo & DeFendis Insurance Brokers,

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : 38185928

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Megan G Colwell

Mailing Address 1001 SW 5th Avenue
 Suite 1000

City State Zip Code
 Portland OR 97204-1126

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Woodruff-Sawyer Oregon, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : 38185929

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8265.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael E Victorson

Mailing Address 349 Medinah St.

City State Zip Code
Oregon WI 53575

FEC ID number of contributing
federal political committee.

C

Name of Employer
M3 Insurance Solutions, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38185935

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Bradley J Plummer

Mailing Address 1041 Shady Oaks Drive

City State Zip Code
Dubuque IA 52003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cottingham & Butler, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185938

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Keith A Kiser

Mailing Address 1505 Brockton Lane

City State Zip Code
Winston Salem NC 27106

FEC ID number of contributing
federal political committee.

C

Name of Employer
BB&T - Blue Ridge Burke Insurance

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38185939

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2083.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael A Paschke

Mailing Address 104 Ontare Hills Lane

City

Santa Barbara

State

CA

Zip Code

93105-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown & Brown of California, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185941

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Brett Cutchin

Mailing Address 9916 Legends Dr

City

Germantown

State

TN

Zip Code

38139-6979

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lipscomb & Pitts Insurance, LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2015

Transaction ID : 38185943

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Michael S Chapman

Mailing Address 55 Goldenrod Ct

City

Kiawah Island

State

SC

Zip Code

29455-5758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International New England

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 08 / 2015

Transaction ID : 38185946

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Robert J Skeete

Mailing Address 672 Flintdale Rd

City

Houston

State

TX

Zip Code

77024-5135

FEC ID number of contributing
federal political committee.

C

Name of Employer

McGriff, Seibels & Williams of Texas,

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38185947

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Angelo M Nardi

Mailing Address 195 Ashbury Cir.

City

Park Ridge

State

IL

Zip Code

60068-2874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arthur J. Gallagher & Co.

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 13 / 2015

Transaction ID : 38185948

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey T Calder

Mailing Address 2 Abbott Ct

City

Orinda

State

CA

Zip Code

94563-3501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barney & Barney, LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185963

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Wade Olson

Mailing Address 130 Theory

City State Zip Code
Irvine CA 92617-3063

FEC ID number of contributing
federal political committee.

C

Name of Employer
BB&T Insurance Services of California,

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185964

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Tina La Rocca

Mailing Address 1551 N Tustin Ave
Suite 700

City State Zip Code
Santa Ana CA 92705-8636

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmWINS Insurance Brokerage of Californ

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38185965

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Rene Leveaux

Mailing Address 2002 North 22nd Ave
Ste. 103

City State Zip Code
Bozeman MT 59718-3153

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hub International Mountain States Ltd.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2015

Transaction ID : 38185966

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Cari Zieske

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185967

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Craig Houck

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185968

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Greg Scoville

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185969

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 61
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Jim Bulotti Jr.

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interwest Insurance Services, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185970

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mike McStocker

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interwest Insurance Services, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185971

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Gregory Hendricksen

Mailing Address 828 John Nolen Drive

City State Zip Code
Madison WI 53713-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
M3 Insurance Solutions, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38185974

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Christine M Kenyon

Mailing Address 828 John Nolen Drive

City

Madison

State

WI

Zip Code

53713

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.70

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185975

Amount of Each Receipt this Period

208.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Michael J Moore

Mailing Address 3113 W Beltline Hwy

City

Madison

State

WI

Zip Code

53713-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185976

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Gerald J Brown

Mailing Address 3113 W Beltline Hwy

City

Madison

State

WI

Zip Code

53713-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185977

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

333.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 61
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Clougherty

Mailing Address 203 N 4th Street

City State Zip Code
 Mount Horeb WI 53572-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185978

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey Ireland

Mailing Address 3113 W Beltline Hwy

City State Zip Code
 Madison WI 53713-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185979

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Jeff Knatz

Mailing Address 1008 Freshir Ct.

City State Zip Code
 Waunakee WI 53597

FEC ID number of contributing
federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

05 / 07 / 2015

Transaction ID : 38185980

Amount of Each Receipt this Period

41.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

133.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Sean LaBorde

Mailing Address 104 Autumn Circle

City State Zip Code
 Mt. Horeb WI 53572

FEC ID number of contributing federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38185981

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Bradley Niebuhr

Mailing Address 117 Pine View Drive

City State Zip Code
 Madison WI 53713-2830

FEC ID number of contributing federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38185982

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Laura Schurman

Mailing Address 3526 Stonebridge Drive

City State Zip Code
 Madison WI 53719-4040

FEC ID number of contributing federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38185984

Amount of Each Receipt this Period

41.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

166.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Chip Arenchild

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185986

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Phil Watkins

Mailing Address 310 Hemsted Drive
Suite 200

City State Zip Code
Redding CA 96002-0935

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185987

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John Hopkins

Mailing Address 1357 E. Larson Ave.

City State Zip Code
Chico CA 95973

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185988

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Ken McKay

Mailing Address PO Box 8110

City State Zip Code
Chico CA 95927-8110

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185990

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mark Blofsky

Mailing Address PO Box 8110

City State Zip Code
Chico CA 95927-8110

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185991

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Nancy Luttenbacher

Mailing Address PO Box 8110

City State Zip Code
Chico CA 95927-8110

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38185993

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Pat Hoffman

Mailing Address PO Box 8110

City State Zip Code
 Chico CA 95927-8110

FEC ID number of contributing
federal political committee.

C

Name of Employer
 InterWest Insurance Services, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38185994

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Dave J Dias

Mailing Address 3636 American River Drive

City State Zip Code
 Sacramento CA 95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Interwest Insurance Services, Inc. (HQ)

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38185995

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Mr. Greg Clauser

Mailing Address 368 E. Yosemite Ave
 Suite 100

City State Zip Code
 Merced CA 95340-9100

FEC ID number of contributing
federal political committee.

C

Name of Employer
 InterWest Insurance Services, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38185996

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 61
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Schoonhoven

Mailing Address 100 Pringle Ave, Ste 550

City	State	Zip Code
Walnut Creek	CA	94596-7369

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	12	/	2015

Transaction ID : 38185997

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mike TaylorMailing Address 100 Pringle Ave, North Tower
Ste 550

City	State	Zip Code
Walnut Creek	CA	94596-7369

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	12	/	2015

Transaction ID : 38185998

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Steve CarmassiMailing Address 100 Pringle Ave
Ste 550

City	State	Zip Code
Walnut Creek	CA	94596-7369

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05	/	12	/	2015

Transaction ID : 38185999

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Tony Bruscia

Mailing Address 330 Tres Pinos Rd Ste A1

City State Zip Code
 Hollister CA 95023-5579

FEC ID number of contributing federal political committee.

C

Name of Employer
 InterWest Insurance Services, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38186000

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Rick Harrison

Mailing Address 222 Court St

City State Zip Code
 Woodland CA 95695-3115

FEC ID number of contributing federal political committee.

C

Name of Employer
 Blackhawke Insurance Services

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38186001

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Diane M Wilkinson

Mailing Address 828 John Nolen Drive

City State Zip Code
 Madison WI 53713-1424

FEC ID number of contributing federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38186006

Amount of Each Receipt this Period

41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1041.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Robert J Kuelzow

Mailing Address 33 Long Creek Dr

City

Burnt Hills

State

NY

Zip Code

12027-9577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rose & Kiernan, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186008

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mark Cornish

Mailing Address 101 Summer Hill Lane

City

St. Davids

State

PA

Zip Code

19087

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRION

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 38186010

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Ross D Reda

Mailing Address 444 W 47th St

City

Kansas City

State

MO

Zip Code

64112-1906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lockton , Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38186017

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Philip F Saussy

Mailing Address 1420 Saint Marys Dr

City

Waycross

State

GA

Zip Code

31501-4321

FEC ID number of contributing
federal political committee.

C

Name of Employer

J. Smith Lanier & Co., Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38186018

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. William Julius Jr.

Mailing Address 828 John Nolen Drive

City

Madison

State

WI

Zip Code

53713

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

05 / 07 / 2015

Transaction ID : 38186020

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Doug Garfinkel

Mailing Address 1722 Sunset Rd

City

Highland Park

State

IL

Zip Code

60035-2343

FEC ID number of contributing
federal political committee.

C

Name of Employer

AmWINS Brokerage of Illinois, LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 04 / 2015

Transaction ID : 38186022

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

791.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Austin L Madison

Mailing Address 6429 Worchester Drive

City State Zip Code
 Nashville TN 37221-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Crichton Group (HQ), The

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38186023

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John Preuss

Mailing Address 505 South 24th Avenue

City State Zip Code
 Wausau WI 54401-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

05 / 07 / 2015

Transaction ID : 38186026

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John Healy

Mailing Address 2896 S. Seminole Hwy. Unit 11

City State Zip Code
 Fitchburg WI 53711-7015

FEC ID number of contributing
federal political committee.

C

Name of Employer
 M3 Insurance Solutions, Inc.

Occupation
 Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

05 / 07 / 2015

Transaction ID : 38186031

Amount of Each Receipt this Period

62.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

645.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Edward Rapee III

Mailing Address Riverwood Corporate Center, Buildi

City State Zip Code
 Waukesha WI 53188

FEC ID number of contributing federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
 05 07 2015

Transaction ID : 38186032

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Matthew Boray

Mailing Address N72 W28925 Fishers Landing

City State Zip Code
 Hartland WI 53029

FEC ID number of contributing federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
 05 07 2015

Transaction ID : 38186033

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Dan Gowen

Mailing Address 406 Otis Ave.

City State Zip Code
 Downers Grove IL 60515-3858

FEC ID number of contributing federal political committee.

C

Name of Employer

Wells Fargo Insurance Services, Inc. (

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 07 2015

Transaction ID : 38186035

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

666.68

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Greg Collins

Mailing Address 2730 258th PI SE

City
SammamishState
WAZip Code
98075-7925FEC ID number of contributing
federal political committee.

C

Name of Employer

Parker Smith & Feek, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186045

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Robert E Welch

Mailing Address 19 Muriel Drive

City
TroyState
NYZip Code
12180-6964FEC ID number of contributing
federal political committee.

C

Name of Employer

Rose & Kiernan, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38186052

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Mathew W Lipscomb III

Mailing Address 1900 Baldwin Road

City
Lake CormorantState
MSZip Code
38641-9619FEC ID number of contributing
federal political committee.

C

Name of Employer

Lipscomb & Pitts Insurance, LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : 38186056

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael E Birge

Mailing Address 8690 Willow Green Cir

City
Sandy

State
UT

Zip Code
84093-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International Insurance Services,

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38186119

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Travis West

Mailing Address 2304 woodlawn blvd

City
austin

State
TX

Zip Code
78703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fringe Benefit Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 13 / 2015

Transaction ID : 38186130

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Paul G Chicos

Mailing Address 264 Glenmoor Rd.

City
Gladwyne

State
PA

Zip Code
19035-1502

FEC ID number of contributing
federal political committee.

C

Name of Employer

AmWINS Brokerage of Pennsylvania

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38186132

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Richard Twietmeyer

Mailing Address 952 Willow Court

City State Zip Code
 Cedarburg WI 53012

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38186135

Amount of Each Receipt this Period

43.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Mary Beth B Basel

Mailing Address 828 John Nolen Drive

City State Zip Code
 Madison WI 53713

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38186143

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Donald Pollard

Mailing Address PO Box 8110

City State Zip Code
 Chico CA 95927-8110

FEC ID number of contributing
federal political committee.

C

Name of Employer

InterWest Insurance Services, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : 38186150

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

626.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Jack P McGrath

Mailing Address 635 Lake Point Drive

City State Zip Code
 Irving TX 75039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International Rigg

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 01 / 2015

Transaction ID : 38186156

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John Conkling

Mailing Address 7406 W Rim Dr

City State Zip Code
 Austin TX 78731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fringe Benefit Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 04 / 2015

Transaction ID : 38186158

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey Steckbauer

Mailing Address 505 S. 24th Avenue

City State Zip Code
 Wausau WI 54401-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : 38186163

Amount of Each Receipt this Period

41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1541.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Garrett Yates

Mailing Address 3636 American River Drive
2nd Floor

City State Zip Code
Sacramento CA 95864-5950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 12 / 2015

Transaction ID : 38186168

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Darren D Brown

Mailing Address 3 Waters Park Drive

City State Zip Code
San Mateo CA 94403-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer

ABD Insurance and Financial Services

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 12 / 2015

Transaction ID : 38186172

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mike DeFendis

Mailing Address 6873 N. West Ave.
Suite 101

City State Zip Code
Fresno CA 93711-4308

FEC ID number of contributing
federal political committee.

C

Name of Employer

DiBuduo & DeFendis Insurance Brokers,

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : 38186174

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Ravi Krishnan

Mailing Address 50 California Street
Floor 12

City State Zip Code
San Francisco CA 94111-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodruff-Sawyer & Company (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : 38186175

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Trey Halbert

Mailing Address 1804 Vista Ln.

City State Zip Code
Austin TX 78703-2952

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLS Partners

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38186176

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Clint Scott

Mailing Address 5105 Standing Oak Lane

City State Zip Code
Austin TX 78746-1269

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLS Partners

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186177

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Matthew R Deininger

Mailing Address Riverwood Corporate Center, Buildi

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186179

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John M Weisinger

Mailing Address Riverwood Corporate Center, Buildi
PO Box 8950

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing
federal political committee.

C

Name of Employer

M3 Insurance Solutions, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186183

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John Weaver

Mailing Address 3600 N. Capital of Texas Hwy
Building B, Suite 100

City State Zip Code
Austin TX 78746-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLS Partners

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186187

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

591.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Lauri Floresca

Mailing Address 50 California Street
Floor 12

City State Zip Code
San Francisco CA 94111-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodruff-Sawyer & Company (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38186193

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. William White

Mailing Address 2 Park Plaza
Suite 500

City State Zip Code
Irvine CA 92614-2565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodruff-Sawyer & Co.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : 38186196

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Matt Culloty

Mailing Address 3600 N. Capital of Texas Hwy
Building B, Suite 100

City State Zip Code
Austin TX 78746-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLS Partners

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2015

Transaction ID : 38186198

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Gordon Brown

Mailing Address 635 S Sego Lily Circle

City	State	Zip Code
North Salt Lake City	UT	84054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Insurance Advisors

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : 38186200

Amount of Each Receipt this Period

65.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Rob Ferguson

Mailing Address 547 Happy Hollow Rd

City	State	Zip Code
Kaysville	UT	84037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Insurance Advisors

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : 38186202

Amount of Each Receipt this Period

58.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Rick Fielding

Mailing Address 2620 Casto Lane

City	State	Zip Code
Salt Lake City	UT	84117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Insurance Advisors

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : 38186203

Amount of Each Receipt this Period

99.39

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.72

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Scott FieldingMailing Address 465 S 400 E
Suite 300

City	State	Zip Code
Salt Lake City	UT	84111

FEC ID number of contributing
federal political committee.

C

Name of Employer

GBS Benefits, Inc. (Leavitt)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

Transaction ID : 38186204

Amount of Each Receipt this Period

43.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Jeff Kluge

Mailing Address 5955 Mountain Ranch Dr

City	State	Zip Code
Park City	UT	84098

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group of Wasatch-Summit

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

Transaction ID : 38186209

Amount of Each Receipt this Period

80.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Don McKean

Mailing Address 6074 Oak Canyon Dr

City	State	Zip Code
Salt Lake City	UT	84121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Insurance Advisors

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2015

Transaction ID : 38186211

Amount of Each Receipt this Period

50.29

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Scott Stewart

Mailing Address 465 S 400 E
Suite 300

City State Zip Code
Salt Lake City UT 84111

FEC ID number of contributing
federal political committee.

C

Name of Employer

GBS Benefits, Inc. (Leavitt)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : 38186216

Amount of Each Receipt this Period

80.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Brian Seamans

Mailing Address 3636 American River Drive

City State Zip Code
Sacramento CA 95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38186219

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Mario Reveles

Mailing Address 3636 American River Drive

City State Zip Code
Sacramento CA 95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38186220

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1080.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Tony Pozas

Mailing Address 3636 American River Drive

City

Sacramento

State

CA

Zip Code

95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38186221

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Dante Bellino

Mailing Address 3636 American River Drive
2nd Floor

City

Sacramento

State

CA

Zip Code

95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38186222

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Ken Salvi

Mailing Address 3636 American River Drive
2nd Floor

City

Sacramento

State

CA

Zip Code

95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38186223

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Thomas DeanMailing Address 18630 Sutter Blvd
Suite 100

City	State	Zip Code
Morgan Hill	CA	95037-2845

FEC ID number of contributing
federal political committee.

C

Name of Employer

AmWINS Insurance Brokerage of Californ

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : 38186237

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Michael D Lynch

Mailing Address 3033 N. Tee Time

City	State	Zip Code
Wichita	KS	67205-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA of Kansas, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : 38292610

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Kurt D Watson

Mailing Address 228 East Pine Meadow Court

City	State	Zip Code
Andover	KS	67002-8840

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA of Kansas, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : 38292613

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Dane O Leavitt

Mailing Address 242 S 200 W

City State Zip Code
 Cedar City UT 84720-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Leavitt Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 15 / 2015

Transaction ID : 38292616

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Dane O Leavitt

Mailing Address 242 S 200 W

City State Zip Code
 Cedar City UT 84720-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Leavitt Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 29 / 2015

Transaction ID : 38292617

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Susan L Pool

Mailing Address 727 North Stagecoach Street

City State Zip Code
 Wichita KS 67230-7020

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA of Kansas, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 14 / 2015

Transaction ID : 38292623

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Steven Terry

Mailing Address 6565 Argonne Blvd

City

New Orleans

State

LA

Zip Code

70124-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International Gulf South

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : 38292628

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Daniel Bowers

Mailing Address 2720 Black Diamond Ter

City

Colorado Springs

State

CO

Zip Code

80918-1570

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIA-Leavitt Insurance Agency, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2015

Transaction ID : 38292636

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Daniel Bowers

Mailing Address 2720 Black Diamond Ter

City

Colorado Springs

State

CO

Zip Code

80918-1570

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIA-Leavitt Insurance Agency, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : 38292637

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Alma Franzoy-Capron

Mailing Address HC 31 Box 200

City Hatch State NM Zip Code 87937-9707

FEC ID number of contributing federal political committee.

C

Name of Employer

Leavitt Group Southwest, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 15 / 2015

Transaction ID : 38292640

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Alma Franzoy-Capron

Mailing Address HC 31 Box 200

City Hatch State NM Zip Code 87937-9707

FEC ID number of contributing federal political committee.

C

Name of Employer

Leavitt Group Southwest, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2015

Transaction ID : 38292641

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Steven M Wilkerson

Mailing Address 1631 SW Topeka Blvd

City Topeka State KS Zip Code 66612-1839

FEC ID number of contributing federal political committee.

C

Name of Employer

IMA Financial Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 14 / 2015

Transaction ID : 38292654

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Hawkins

Mailing Address 1705 17th Street
Suite 100

City State Zip Code
Denver CO 80202-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMA Financial Group, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : 38292656

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Bradley L Johnson

Mailing Address 16621 Autumn Rock Cove

City State Zip Code
Parker CO 80134-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMA Financial Group, Inc. (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : 38292657

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John W Chaney

Mailing Address 30032 Shadow Creek Dr

City State Zip Code
Westlake OH 44145-7802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38292680

Amount of Each Receipt this Period

42.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

542.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael D Ugljesa

Mailing Address 8259 Michelle Lane

City

Lambertville

State

MI

Zip Code

48144-9582

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : 38292686

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John H McDermott

Mailing Address 5826 Winslow Rd

City

Whitehouse

State

OH

Zip Code

43571-9188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : 38292687

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Mark A Miller

Mailing Address 1091 Beacon Hill Dr

City

Dexter

State

MI

Zip Code

48130-9001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2015

Transaction ID : 38292694

Amount of Each Receipt this Period

41.68

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Paul Catania

Mailing Address 5758 Williamsburg Cir

City State Zip Code
Hudson OH 44236-3780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2015

Transaction ID : 38292695

Amount of Each Receipt this Period

208.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Kristi W Gjellum

Mailing Address 2388 S Juniper Cir

City State Zip Code
Lakewood CO 80228-6445

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA Financial Group, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : 38292716

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mrs. Dyan M Thornton

Mailing Address 2948 North Penstemon Court

City State Zip Code
Wichita KS 67226-1818

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA of Kansas, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : 38292728

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

958.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael L Waybright

Mailing Address 445 California Ave

City State Zip Code
Lorain OH 44052-2078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 18 / 2015

Transaction ID : 38292739

Amount of Each Receipt this Period

320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Kevin Brennan

Mailing Address 1120 Madison Ave

City State Zip Code
Toledo OH 43604-7538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brooks Insurance Agency, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 26 / 2015

Transaction ID : 38292741

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey S Murphy

Mailing Address 6715 Azalea Way SE

City State Zip Code
Snoqualmie WA 98065-9069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parker Smith & Feek, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 26 / 2015

Transaction ID : 38292751

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Joseph G DuBois

Mailing Address 10485 Penniman Drive

City State Zip Code
 Chardon OH 44024-8230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : 38292767

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Bill D Henry

Mailing Address 6801 Baltimore Dr

City State Zip Code
 Dallas TX 75205-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer

McQueary Henry Bowles Troy, L.L.P. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 27 / 2015

Transaction ID : 38292841

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Scott D Dillabaugh

Mailing Address 95 Ruskin Rd.

City State Zip Code
 Amherst NY 14226-4255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 13 / 2015

Transaction ID : 38292844

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5484.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Andria Herr

Mailing Address 250 International Parkway
Suite 330

City State Zip Code
Lake Mary FL 32746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hylant

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38292882

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mike Nixon

Mailing Address 2401 West Big Beaver Road
Suite 400

City State Zip Code
Troy MI 48084-3306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hylant

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38292888

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Cheryl Henry

Mailing Address 8144 Walnut Hill Lane
Suite 1600

City State Zip Code
Dallas TX 75231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

McQueary Henry Bowles Troy, L.L.P. (HQ)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : 38292895

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5091.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Gregory A Nemmers

Mailing Address 85 Campau Avenue NW
Suite 100

City State Zip Code
Grand Rapids MI 49503-2720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hylant

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38292897

Amount of Each Receipt this Period

41.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Matthew Dills

Mailing Address 811 Madison Avenue, Fl 10

City State Zip Code
Toledo OH 43604-5626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Hylant Group (HQ)

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : 38292921

Amount of Each Receipt this Period

42.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Kathi Perryman

Mailing Address 1705 17th Street
Suite 100

City State Zip Code
Denver CO 80202-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IMA

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : 38292939

Amount of Each Receipt this Period

600.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Robin Heller

Mailing Address 1705 17th Street
Suite 100

City State Zip Code
Denver CO 80202-1260

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMA

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 14 / 2015

Transaction ID : 38292955

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Francis X Kelly III

Mailing Address 1200 Scotts Knoll Court

City State Zip Code
Lutherville MD 21093-3738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kelly & Associates Insurance Group Inc

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38295218

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. R. J Elliott Jr

Mailing Address 305 Westham Parkway

City State Zip Code
Richmond VA 23229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hilb Group LLC, The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38295219

Amount of Each Receipt this Period

500.00

☐ Memo Item

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TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bruce Thomas

Mailing Address 3636 American River Drive

City

Sacramento

State

CA

Zip Code

95864-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interwest Insurance Services, Inc. (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2015

Transaction ID : 38295220

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John Nelson

Mailing Address 32110 Agoura Rd

City

Westlake Village

State

CA

Zip Code

91361-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Warner Pacific Insurance Services, Inc

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38295221

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Lerone Sidberry

Mailing Address 55 East Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-4466

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International Limited (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 07 / 2015

Transaction ID : 38295222

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Matthew Bauer

Mailing Address 1357 E. Lassen Avenue

City State Zip Code
Chico CA 95973-7824

FEC ID number of contributing
federal political committee.

C

Name of Employer
InterWest Insurance Services, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2015

Transaction ID : 38295223

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Jon R Duczak

Mailing Address 5407 Trillium Blvd.

City State Zip Code
Hoffman Estates IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fringe Benefit Group

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 38295224

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Terry Payne

Mailing Address 2620 Radio Way, Ste C

City State Zip Code
Missoula MT 59808-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer
PayneWest Insurance, Inc.

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2015

Transaction ID : 38295225

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Pat Frost

Mailing Address PO Box 1600

City State Zip Code
 San Antonio TX 78296-1600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frost Insurance

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 18 / 2015

Transaction ID : 38295226

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Wendra Johnson

Mailing Address 131 S. Federal Hwy, #725

City State Zip Code
 Boca Raton FL 33432-4962

FEC ID number of contributing
federal political committee.

C

Name of Employer

CBIZ Benefits & Insurance Services Gro

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295564

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Mark C Nickel

Mailing Address 269 Auburn Run

City State Zip Code
 Pittsford NY 14534-9557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rose & Kiernan, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295565

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 61

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Douglas Schenendorf

Mailing Address 100 Sunnyside Blvd

City

Woodbury

State

NY

Zip Code

11797-2925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hub International Northeast

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295566

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Mike M Morey

Mailing Address 609 E Virginia Ave

City

Glendora

State

CA

Zip Code

91741-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bolton & Company Insurance Brokers (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295567

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Zac Overbay

Mailing Address 50 California St, 12th Floor

City

San Francisco

State

CA

Zip Code

94111-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Woodruff-Sawyer & Co.

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295568

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. W. Martin Yung

Mailing Address 4713 Jacaranda Ln

City

El Paso

State

TX

Zip Code

79922-2108

FEC ID number of contributing
federal political committee.

C

Name of Employer

John D. Williams Company

Occupation

Insurance Broker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 38295570

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

99878.14

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

The Council of Insurance Agents & Brokers Political Action Committee

A. ANYBILL

00:

220.62

 Memo Item

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B. PayPal, Inc.

MM / DD / YYYY

00

1669.28

Memo Item

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. Authorize.Net

00'

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	20.00
45-54	25.00
55-64	30.00
65-74	35.00
75+	45.00

 Memo Item

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

1934.90

1934.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 61

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Moran For Kansas

Mailing Address PO Box 1151

City	State	Zip Code
Hays	KS	67601

Purpose of Disbursement

011

Candidate Name

Jerry Moran

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2015

Transaction ID : 38204726

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For Congress

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement

011

Candidate Name

Rep. Kurt Schrader

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2015

Transaction ID : 38204727

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. MD for Congress Committee

Mailing Address PO Box 80126

City	State	Zip Code
Lafayette	LA	70598

Purpose of Disbursement

011

Candidate Name

Rep. Charles W. Boustany Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2015

Transaction ID : 38279472

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement

011

Candidate Name

Sen. Joe Simon Donnelly Sr.

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : 38279508

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heartland Values PAC

Mailing Address P.O. Box 505

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement

011

Candidate Name

Heartland Values PAC

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : 38279509

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heidi For Senate

Mailing Address PO Box 1577

City	State	Zip Code
Bismarck	ND	58502

Purpose of Disbursement

011

Candidate Name

Sen. Heidi Heitkamp

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: ND District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		26		2015

Transaction ID : 38279511

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Himes For Congress

Mailing Address 857 Post Road, #312

City Fairfield	State CT	Zip Code 06824
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Purpose of Disbursement

011

Category/
Type

Candidate Name

Jim Himes

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279512

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pete Sessions For Congress

Mailing Address PO Box 823047

City Dallas	State TX	Zip Code 75382
----------------	-------------	-------------------

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Pete Sessions

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279513

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RFW PAC

Mailing Address P.O. Box 196

City Tupelo	State MS	Zip Code 38802
----------------	-------------	-------------------

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279514

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 61

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Synergy PACMailing Address 501 3rd Street, NW
Suite 200

City Washington State DC Zip Code 20001

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279516

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Don Beyer

Mailing Address 1751 Potomac Greens Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Rep. Don BeyerOffice Sought: ☒ House
☐ Senate
☐ President
State: VA District: 08Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279519

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delbene For Congress

Mailing Address PO Box 487

City Bothell State WA Zip Code 98041

Purpose of Disbursement

Candidate Name

Rep. Suzan DelBeneOffice Sought: ☒ House
☐ Senate
☐ President
State: WA District: 01Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : 38279520

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10500.00

34000.00
